PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mall Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (57)1-273-2885

| CURRENT CORRESPONDENCE ADDRESS (Nets: Use Block 1 for any change of address) | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | |
|---|---|--|--|--|---|--|---|
| Joe McKinney | 7590 03/09 Muncy | V2010 | | Cor | Hillanta o | Malling or Trans | mirelon |
| PO Box 1364 Fairfax, VA 220 | 38-1364 | | add tran | essed to the Mai smitted to the USP | Stop 18 TO (571) | SUE FEE address 273-2885, on the d | deposited with the United t class mail in an envelope above, or being facsimile ate indicated below. |
| | | | | | | ^ | (Depositor's name) |
| | • | | . 1- | | | | (Signature) |
| | 1 | | | | | | (Date) |
| 10/645,597 | APPLICATION NO. FILING DATE 10/645,597 08/22/2003 | | FIRST NAMED INVENTOR Tse-Fen Ku | | ATTORNEY DOCKET NO. 2450-0497P | | CONFIRMATION NO. |
| TITLE OF INVENTION | i: DATA TRANSMISSIO | ON SYSTEM FOR LINK | ING MULTIPLE EXERC | ISE FACILITIES | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID (SSU | E FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | YES | \$755 | \$300 | \$0 | | \$1055 | 06/09/2010 |
| EXAM | EXAMINER | | CLASS-SUBCLASS | | | | |
| MEJIA, ANTHONY | | 2451 | 709-200000 | | | | |
| Change of correspondence address or indication of "Fee Address' [FR 1.363]. Change of correspondence address (or Change of Correspond Address from 1705/81/122) attack Fee Address' indication (or "Fee Address' Indication form FTOSB47-7 with Od-20 or more recomb) attached. Use of a Cust Number is required. | | | (1) the names of up to 3 mgistered patent attorneys or agento RR, alternatively. (2) the name of a single firm (having as a member a registered patent attorneys or agen) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be primited. | | | | |
| PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI | less an assignee is ident th in 37 CFR 3.11. Comp | ified below, no assignee pletion of this form is NO | THE PATENT (print or ty) data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY Taichung City | atent. If an assign assignment. and STATE OR C | OUNTR | Y) | ocument has been filed fo |
| Please check the appropr | iate assignee category or | categories (will not be pr | rinted on the patent): | Individual 🖾 Co | orporation | or other private gro | oup entity Governmen |
| 4a. The following fee(s) ☑ Issue Fee ☑ Publication Fee (N ☐ Advance Order - | No small entity discount p | | b. Payment of Fec(s): (Plea A check is enclosed. Payment by credit car The Director is hereby overpayment, to Depo | d. Form PTO-2038 | is attach | ned. | shown above) ficiency, or credit any nextra copy of this form). |
| a. Applicant claim | tus (from status indicated is SMALL ENTITY statu | is. See 37 CFR 1.27. | ☐ b. Applicant is no long | ger claiming SMA | LL ENTI | TY status. See 37 Cl | FR 1.27(g)(2). |
| NOTE: The Issue Fee an interest as shown by the | d Publication Fee (if requestreed of the United Sta | uired) will not be accepted ses Patent and Trademark | d from anyone other than to Office. | ne applicant; a regi | stered att | omey or agent; or th | e assignee or other party is |
| Authorized Signature | | | | Date | 05/13 | /2010 | |
| | Joe McKinn | | | Registration N | | | |
| This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Viginia 223 | ation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this bur irginia 22313-1450. DO | FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (| on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO | etain a benefii by i imaied to take 12 i idual case. Any co r, U.S. Paient and THIS ADDRESS | he public ninutes is mments Tradema S. SEND | which is to file (and complete, including on the amount of tir rk Office, U.S. Depa TO: Commissioner | by the USPTO to process g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450 |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.